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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Indian-Americans for Trump 2016 11 Pinewood Lane ADDRESS (number and street) (Check if address is changed) Warren 07059 NJ CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS amardamar@yahoo.com (Check if address is changed) Optional Second E-Mail Address |davemakkar@yahoo.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2016 C00605691 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Devendra (Dave) Makkar Type or Print Name of Treasurer Devendra (Dave) Makkar [Electronically Filed] 01 22 2016 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only Local 202-694-1100

FEC I	Form 1 (Revised 02/2009)	Page 2
	COMMITTEE	
	te Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	nplete the candidate
Name of Candidate	Donald J Trump	
Candidate Party Affili	Office ation Sought: House Senate President	State
rarty Ailiii	audit Sought. House Senate Fresident	District
(c) X	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co	ommittee:	
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate so	eareaated fund or party
(*)	committee. (i.e., nonconnected committee)	-greganer remark property
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fu	ndraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
Со	mmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

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Write or Type Committee Nan		
Indian-America	ans for Trump 2016	
	Organization, Affiliated Committee, Joint Fundraising Representative, or Lead	lership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the person in	possession of committee
Devendra Full Name	a (Dave) Makkar	
	568 Ashwood Roard	
Mailing Address		
	Springfield NJ 0708	;1
Title or Position	CITY STATE	ZIP CODE
Treasurer/Secretary	Telephone number 973 –	416 1400
Treasurer: List the name a any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	name and address of
	a (Dave) Makkar	1
of Treasurer	568 Ashwood Roard	
Mailing Address		
		1 1 1
	CITY STATE	ZIP CODE
Title or Position Treasurer/Secretary	973 Telephone number	416 - 1400

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Full Name of Designated Agent	Professor A. D. Amar	
Mailing Address	11 Pinewood Lane	
	Warren NJ 07059 CITY STATE	ZIP CODE
Title or Position President		469 - 8319
		s accounts, rents
	Investors Bank	
Mailing Address	Investors Bank Stuyvesant Village Office	
Mailing Address		
Mailing Address		
Mailing Address	Stuyvesant Village Office	ZIP CODE
Mailing Address Name of Bank, D	Stuyvesant Village Office Irvington CITY STATE	ZIP CODE
	Stuyvesant Village Office Irvington CITY STATE	ZIP CODE
	Stuyvesant Village Office Irvington CITY STATE	ZIP CODE
Name of Bank, D	Stuyvesant Village Office Irvington CITY STATE	ZIP CODE
Name of Bank, D	Stuyvesant Village Office Irvington CITY STATE	ZIP CODE

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

Page 5 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Mailing Address **CITY** STATE . ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Esq Anand Ahuja Full Name 76 North Broadway Mailing Address Hicksville NJ 11801 Title or Position CITY # **STATE** ZIP CODE Vice President 516 502 Telephone number [ADDITIONAL] Joint Fundraiser Participant FEC ID number